RE21 AVAILABLE COPA

								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001									10/026121					
CLAIMS AS FILED - PART I								SMALL	. EN	ITITY		OTHER	THAN	
77	TAL CLAME		(Column	1)	(Column 2)			TYPE			OR OR		SMALL ENTITY	
TOTAL CLAIMS			17					RATE		FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 370.00		370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			7 minus 20=		*			X\$ 9=		OR	X\$18=	·.		
INDÉPENDENT CLAIMS			minus 3 =		*			X42=			OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					140			1 '''I			
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=			OR	+280=		
								TOTA	L		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY						
	(Column 1 CLAIMS			HIGH	EST	(Column 3)	ול	SMALL		ADDI-	OR 1 1	SWALL	ADDI-	
AMENDMENT A	Market Spraagballe	REMAINING AFTER AMENDMENT	Market 12	NUM PREVIC PAID	OUSLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	. 17	Minus	*2	d	=		X\$ 9=	-		OR	X\$18=		
AME	Independent	<u> </u>	Minus	***	<u> </u>	=		X42=			OR	X84=	:	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.140	┪		1	000		
							ı	+140=			OR	+280=		
						,	TOT. Addit. Fi		 :	OR,	TOTALI ADDIT. FEE			
_		(Column 1)	-	(Colur		(Column 3)	, i				. ,			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER	PRESENT EXTRA		RATE		ADDI- TIONAL F <u>E</u> E		RATE	ADDI- TIONAL FEE	
	Total	. 17	Minus	 2	0	=		X\$ 9=	.		OR	X\$18=	1	
	Independent	. /	Minus	***	<u>3 </u>	=		X42=	7	1	OR	X84=	/	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╽┟	+140=	+	+		 /		
									_		OR	+280≠		
									E		OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C	N .	CLAIMS REMAINING	744	HIGH NUM	HEST MBER	PRESENT] Г			ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO PAID		EXTRA		RATE		FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		= .	 	X\$ 9=	1		OR	X\$18=	1 6-6-	
	Independent	*	Minus	***		=-	ŀ	X42=	T		i	X84=	1	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	A42-	+		OR	704=	-	
	f shan are to the second					+140=	_]		OR	+280=				
**	If the "Highest Nu	mn 1 is less than the mber Previously Pa	id For IN THI	S SPACE is	s less thai	n 20, enter "20."		TOTA DDIT. FE			OR A	TOTAL ODIT. FEE		
-	it the "Highest Nu The "Highest Nur	mber Previously Pa ber Previously Pai	aid For IN THI d For (Total or	S SPACE i Independe	s less tha ant) is the	n 3, enter "3." highest number				opriate box				